# NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON
Governor
Joanna Prukop
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

October 14, 2003

Saba Energy of Texas, Inc.
P.O. Box 6209
Santa Maria CA 93456

Saba Energy of Texas, Inc.
4500 W. Illinois, No. 209
Midland, TX 79703

Redland Insurance Company
300 West Broadway
Council Bluffs, IA 51503

Redland Insurance Company
1177 Avenue of the Americas
New York, NY 10036

**VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED** 7099 3220 0009 7823 0912

Re:    Case No. 13163: Application of the New Mexico Oil Conservation Division for an Order
       Requiring Saba Energy of Texas, Inc., to Properly Plug Six Wells, Imposing Civil Penalties
       for Failure to Comply, Authorizing the Division to Plug Said Wells and Ordering a
       Forfeiture of Applicable Plugging Bond; Lea County, New Mexico

Ladies and Gentlemen:

You are hereby notified that the New Mexico Oil Conservation Division has filed the referenced Application, a copy of
which is enclosed herewith, seeking an Order requiring you to properly plug and abandon six wells located in Lea County,
New Mexico, specifically identified in said application.

A hearing on this application will take place before a Division hearing officer on Friday, November 7, 2003 at 8:15 a.m., in
Porter Hall, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity
to show cause why an order should not be entered as requested in the Application.

You posted a surety bond in the amount of $50,000, No. RED 1023122 issued by Redland Insurance Company. That security
will be forfeited if an order is entered as requested in the attached application and you fail to comply therewith.

Inquiries concerning this application may be directed to the undersigned in the Santa Fe office of the Division at (505) 476-
3451.

Very truly yours,

Gail MacQuesten
Assistant General Counsel
ec:    Chris Williams and Billy Prichard, Hobbs District

## U.S. Postal Service
## CERTIFIED MAIL RECEIPT
*(Domestic Mail Only; No Insurance Coverage Provided)*

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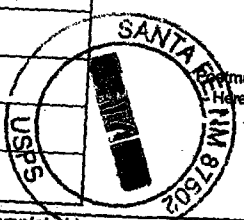
Name (Please Print Clearly) (To be completed by mailer)
**Redland Insurance Company**
Street, Apt. No.; or PO Box No.
1177 Avenue of the Americas
City, State, ZIP+4
New York, NY 10036

PS Form 3800, July 1999          See Reverse for Instructions

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- ■ Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Redland Insurance Company
1177 Avenue of the Americas
New York, NY 10036

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10/20

C. Signature
X _Erin Joy_    ☐ Agent   ☐ Addressee

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   If YES, enter delivery address below: ☐ No

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   ☐ Registered       ☐ Return Receipt for Merchandise
   ☐ Insured Mail     ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)          ☐ Yes

2. Articl
7099

PS Form

OCD
13163

595-99-M-1789